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Date of Transmission: May 15, 2006

Name of Person Making Transmission: Robert Faber

Signature

Robert Faber

DOCUMENT(S) FAXED:

PAGES ATTACHED: 6

Re Applic of	Sadanand V. Deshpande et al.
Docket No.	FIS920040061US1
Serial No.	10/709,673
Filing Date	05/21/2004
Attorney	James J. Cioffi

Attached: Amendment Transmittal Letter
Amendment
Replacement Drawing Sheet

PLEASE DELIVER TO:
EXAMINER: Phuc T. Dang
ART UNIT: 2818
CONFIRMATION NO.: 3672
PHONE NO:
FAX NO: 571-273-8300

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INTERNATIONAL BUSINESS MACHINES CORPORATION

Intellectual Property Law
East Fishkill Facility
2070 Route 52
Hopewell Junction
New York 12533-6531

Fax: 845-892-6363
Phone: 845-894-2580

MAY 15 2006

Docket No.

FIS920040061US1

AMENDMENT TRANSMITTAL LETTER (Large Entity)

Applicant(s): Sadanand V. Deshpande

Application No.
10/709,673Filing Date
05/21/2004Examiner
Phuc T. DangCustomer No.
32074Group Art Unit
2818Confirmation No.
3672

Invention: METHOD FOR PATTERNING A SEMICONDUCTOR REGION

COMMISSIONER FOR PATENTS:

Transmitted herewith is an amendment in the above-identified application.

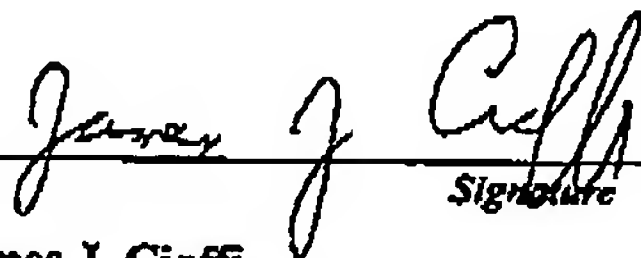
The fee has been calculated and is transmitted as shown below.

CLAIMS AS AMENDED

	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	30 -	30 =	0	x \$50.00	\$0.00
INDEP. CLAIMS	3 -	3 =	0	x \$200.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00

- ☒ No additional fee is required for amendment.
- ☐ Please charge Deposit Account No. _____ in the amount of _____
- ☐ A check in the amount of _____ to cover the filing fee is enclosed.
- ☒ The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 09-0458
- ☒ Any additional filing fees required under 37 C.F.R. 1.16.
- ☒ Any patent application processing fees under 37 CFR 1.17.
- ☐ Payment by credit card. Form PTO-2038.

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

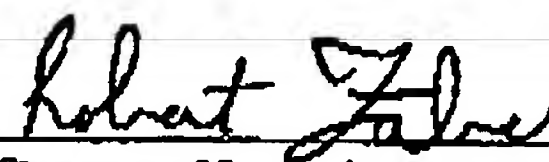

Signature

James J. Cioffi
Attorney for Applicant
Registration No. 51,564
Telephone No. 845-894-3363
Fax No. 845-892-6363

Dated: May 15, 2006

I hereby certify that this correspondence is being facsimile transmitted to The Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313 on the date shown below:

May 15, 2006
(Date)


Signature of Person Mailing Correspondence

Robert Faber

Typed or Printed Name of Person Mailing Correspondence

cc:

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Name of Person Making Transmission: Robert Faber
Date of Transmission: May 15, 2006

Robert Faber 5/15/06
(Signature & date)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE	
In re application of: Sadanand V. Deshpande et al.	Date: May 15, 2006
Serial Number: 10/709,673	Examiner: Phuc T. Dang
Filed: May 21, 2004	Group Art Unit: 2818
Title: Method for Patterning a Semiconductor Region	IBM Corporation D/18G, B/321, Zip 482 2070 Route 52 Hopewell Junction, NY 12533-6531

AMENDMENT

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Dear Sir:

In response to the Office Action dated March 14, 2006, the following Amendment is being submitted to place the above identified application in prima facie condition for allowance. Please amend the application as follows: